## This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

## NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 347438

## Total Fee Calculation

|                        | Fee Code           | Total<br># Claims | Number<br>Extra | _x | Fee           | Fee =      | · .               |
|------------------------|--------------------|-------------------|-----------------|----|---------------|------------|-------------------|
|                        | Sm./Lg.            |                   |                 |    |               |            | Total             |
| Basic Filing Fee       | 201/101            |                   |                 |    | Sm. Entity    | Lg. Entity | 70000             |
| Total Claims >20       | 203/103            | 28 -20 =          | <b>Ø</b>        |    |               |            | 760.°°            |
| Independent Claims >3  |                    | <u>-20</u> -20 =  |                 | X  |               |            | 144. <sup>∞</sup> |
| Mult Dep Claim Present | 202/102<br>204/104 | -3=               |                 | x  |               |            | 78. <sup>®</sup>  |
| Surcharge              | 205/105            |                   |                 |    | <del></del> . |            | ·                 |
| English Translation    | 139                |                   |                 |    |               |            | 130,00            |
| TOTAL -                |                    | ·                 |                 |    |               |            | ·                 |

## TOTAL FEE CALCULATION

Fees due upon filing the application:

Total Filing Fees Due = \$ 1112. \*\*

Less Filing Fees Submitted - \$\_\_\_\_\_

BALANCE DUE = S 1112.00

Office of Initial Parent Examination